



March 2004

To submit information, update, or ask questions, please contact Diana Der Koorkanian at (301) 594-4113 or by e-mail: dderkoorkanian@hrsa.gov or Amanda Ford at (301) 594-4431 or aford@hrsa.gov.

LATE BREAKING NEWS

Greetings!

STAFF UPDATE: We would like to congratulate Sherilyn Adams on the birth of her daughter, Shaina Louise Adams. Shaina was born on February 6, 2004. Both Sherilyn and Shaina are doing very well. While Sherilyn is out on Maternity leave, Diana Der Koorkanian and Eve Morrow are handling her Project Officer duties. Diana will be assisting New York grantees and Eve will be working with the grantees in Maryland, Delaware, Pennsylvania and the District of Columbia.

FY 2004 HEALTHY COMMUNITIES ACCESS PROGRAM (HCAP) APPLICATION GUIDANCE: The Application Guidance for FY 2004 New and 4th Year Competing Continuation Awards Under Extraordinary Circumstances "Funding Opportunities for New and Fourth Year Competing Continuation Healthy Communities Access Program (HCAP) Grant Applicants" is now available.

You can access the guidance using the following link:

<http://www.hrsa.gov/grants/preview/guidancebphc/hrsa04038.htm>.

PEER TO PEER REQUEST: The Healthy Communities Initiative in South Bend, Indiana is an HCAP in an urban community with a population of clients that are very transient; after they leave the clinic it is difficult to reach them. They are interested in finding out if there are other communities with the same problem and if so, how are they addressing their clients' needs, giving them information about their diseases, and encouraging medical follow up. Currently they work with underinsured clients that have diabetes, hypertension and asthma. If any HCAP community can offer assistance or advice please contact Marlene E. Logan by phone at (574) 360-5098 or by email at mlogan@healthcommunities.org.

Thanks!
Amanda & Diana

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CAP TA CALLS

Technical assistance calls for grantees are generally held every other Thursday from 2 to 3 PM EST. The schedule for March appears below. To register, search for summaries or materials from prior calls, or download materials for upcoming calls, please go to the grantee Website: www.capcommunity.hrsa.gov. Please remember that the site is password protected. Grantees should contact their primary contact to receive the password. Once you register for the call you should immediately receive a confirmation note by email that includes the call-in number. Please be sure to download the materials that will be used. If you have difficulty registering or do not receive the call-in number, please contact Latonya Dunlow at ldunlow@mscginc.com or call 301-577-3100.

CAP TA Calls	
Date	Topic
March 18 th	Measuring Collaboration This TA call will address issues critical to effective collaboration in HCAP consortia partnerships. Our first featured speaker, Ed Fonner, DrPH is an independent consultant presently focusing on community-based prevention and wellness. Ed will present an overview on what to look for and how to measure different aspects of your collaboration. Suggestions on how to improve collaboration will also be offered. Our second featured speaker, Kate Cauley, is the Director of Center for Healthy Communities, Wright State University School of Medicine, the applicant for the HCAP grant awarded in Dayton, Ohio to the HealthLink Miami Valley project. Kate will present a case study of a best practice in measuring and managing an HCAP partnership. She will focus on operationalizing the definitions of the collaborative model, day-to-day strategies for maintaining and strengthening the partnership, and results of a partnership assessment tool used as a pre-post test instrument in their overall project evaluation.
April 1 st	Electronic Medical Records 101 Further details to be announced via email and on the grantee website.

With the exception of calls related to legal issues, TA calls are summarized and posted on the grantee website (www.capcommunity.hrsa.gov). Legal issue briefs are posted on the site under legal issues. You may also request an audiotape copy of any previous calls (up to one month after the call) by contacting Latonya Dunlow at the email above.

GRANTEE NEWS

Project Access Of Danville

Danville, Virginia

On February 24, 2004, Project Access of Danville was awarded a grant from the Harvest Foundation in Martinsville, Virginia, in the amount of \$18,434. This grant is a four-month planning grant to determine the feasibility and lay the groundwork necessary to implement a Project Access model in the Martinsville-Henry County area. Project Access of Danville has already begun meeting with physicians, the Free Clinic and local hospital officials, and has received positive support for such a model.

Funds will also be used to continue the Southside MedAssist Program in the area for the next four months. Southside MedAssist assists Project Access clients and any other clients who meet the pharmaceutical companies' indigent care program guidelines with medication assistance. It began enrolling clients into Southside MedAssist in the Martinsville-Henry County area in November at the request of the local hospital. These medications provide the chronically ill with lifesaving prescription medications they would otherwise not be able to afford. For more information about this

program, please contact Kay Crane at 434-791-3630 or by email at kcrane@projectaccessdan.org.

Kootenai Medical Center/North Idaho Partners In Care

Coeur D'Alene, Idaho

Congratulations to the Kootenai Medical Center, who on February 27, 2004 opened their second Federally Qualified Health Center. The opening of this center has helped them meet one of the primary objectives of their HCAP program, which was to develop clinics to serve the uninsured and underinsured. The clinic will be open five days a week and will help meet the need for more accessible health care for the uninsured in the community. The clinic also plans to assist people with Medicaid enrollment if they qualify. Kootenai Medical Center also opened a new volunteer clinic in Bonner County to serve the uninsured and underinsured within this community. Although the goal for the HCAP was to open volunteer clinics, the grantee was able to open two CHCs in two counties. For more information about this program, please contact Karen Cotton at 208-666-3742 or by email at kcotton@kmcmail.kmc.org.

GRANT OPPORTUNITIES AND AWARDS

2004 Foster G. McGaw Prize

Deadline: April 2, 2004

The Prize honors health delivery organizations (hospitals, health systems, integrated networks, or self-defined community partnerships) that have demonstrated exceptional commitment to community service. Any health delivery organization that exhibits the Foster Award criteria is eligible to apply for the Prize, which is one of the most coveted, significant honors in health care. The award criteria include: Leadership; Commitment; Partnerships; Breadth and Depth of Initiatives; and Community Involvement. The first prize award is \$100,000, while up to three finalists may receive a \$10,000 award. For details, please go to: <http://www.hospitalconnect.com/aha/awards-events/foster/index.html>.

American Dental Association Grants

Deadline: July 9, 2004

The ADA Foundation, the charitable arm of the American Dental Association, has established a permanent endowment fund, The Harris Fund, dedicated to the prevention of childhood cavities and oral health maintenance for children. The fund will award competitive grants to applicants whose oral health promotion programs are designed to improve and maintain children's oral health through community education programs. The grant program's main objective is to help children whose socioeconomic status impacts their access to professional oral care and adversely affects their oral health habits at home. Proposals of up to \$5,000 by community-based, not-for-profit, oral health promotion programs in the United States and its territories

will be considered. Examples of qualified oral health promotions include: dental health education conducted at schools, health fairs, and social agencies via mobile dental clinics or outreach programs; dental health education programs in conjunction with preventive programs such as fluoride and dental sealant application programs; and oral health and nutrition education materials designed for parents and/or dental professionals. For more information, see the ADA Foundation Web site for complete program guidelines and application procedures: http://www.ada.org/ada/prod/adaaf/prog_access_harris.asp.

Funds For Interfaith Community Volunteer Caregiving Programs

Deadline: June 1, 2004

The Robert Wood Johnson Foundation's Faith in Action program is an interfaith volunteer caregiving program that brings together religious congregations of all faiths and other community organizations such as hospices, clinics, and hospitals, in a common mission to provide volunteer care to neighbors with long-term health needs. The program, funded by the Robert Wood Johnson Foundation, offers start-up grants of up to \$35,000 to help communities organize new coalitions for volunteer caregiving. For more about Faith in Action, log onto www.faithinaction.org.

Quality Health Foundation Grants

Deadline: March 15, 2004

The Delmarva Foundation, a national not-for-profit organization committed to improving the quality of health care, has established the Quality Health Foundation (QHF) and will award grants to eligible organizations in states that are part of the foundation's service area -- Maryland, the District of Columbia, Virginia, West Virginia, Vermont, Florida, California, and the Delmarva Peninsula. Grants will be awarded to organizations that are working to improve health care for individuals and communities.

QHF will fund projects of many types, including service demonstrations and rapid-cycle change projects that have the potential to produce high impacts on health outcomes. One-year grants of up to \$50,000 may be awarded to eligible organizations. For details, please visit: <http://www.qualityhealthfoundation.org/>.

Local Initiative Funding Partners

Deadline: July 14, 2004

The *Local Initiative Funding Partners* (LIFP) program is a partnership program between The Robert Wood Johnson Foundation (RWJF) and local grantmakers that supports innovative, community-based projects to improve health and health care for society's most vulnerable people. RWJF invites grantmaking organizations, including independent and private foundations, family and community foundations, and corporate and other philanthropies to recommend dynamic projects for this funding partnership.

Local Initiative Funding Partners provides grants of \$100,000 to \$500,000 per project, which must be matched dollar for dollar by local grantmakers. The total award is paid out over a three-year or four-year period. In 2005, up to \$7.5 million will be awarded.

For more information on this grant opportunity, eligibility requirements and the application process, go to <http://www.rwjf.org/cfp/lifp>. Or contact Sandra Lopacki, Deputy Director, at slopacki@lifp.org or 609-275-4128.

Naccho's Model Practices Award Program

Deadline: April 2, 2004

The National Association of County and City Health Officials' Model Practices Awards Program and Database is an online, searchable collection of model practices that will be available by spring 2004. The 2nd Annual Model Practices Awards program helps local public health agencies "share what works." All local public health agencies and affiliate members of NACCHO are encouraged to submit examples of model practices, programs, and/or policies at any time.

Entries submitted by **April 2, 2004** will be considered for a Model Practices Award, to be presented at the NACCHO 2004 conference in St. Paul, Minnesota. A model practice is an initiative, program, resource, administrative practice, or tool that demonstrates exemplary and replicable qualities in response to public health needs. For more information, visit: www.naccho.org/modelpractices.

CONFERENCES, PROGRAMS, AND OTHER NEWS

Cover the Uninsured Week 2004

May 10 -16, 2004

Cover the Uninsured Week 2004, a project of the Robert Wood Johnson Foundation, is less than six months away. Building on the success of *Cover the Uninsured Week 2003*, over 800 national and local organizations and thousands of Americans in all 50 states and the District of Columbia will once again work to make the issue of the uninsured a focus of national discussion. From May 10 -16, 2004, events will be held coast to coast so that more Americans can learn about this critical problem -- who is affected, why they are uninsured, the consequences of being uninsured to physical and financial health -- and how this issue affects every American, not just those who are uninsured.

Following are the *initial* target markets for *Cover the Uninsured Week 2004*. *Cover the Uninsured Week* staff will help local coalitions organize events in these communities. Additional markets may be announced soon. Interested individuals and organizations in all communities are welcome to sign on and plan activities for the week. The initial target markets are: Albuquerque, NM; Chicago, IL; Denver, CO; Detroit, MI; Houston, TX; Los Angeles, CA; Nashville, TN; New Orleans, LA; New York, NY; Portland, OR; Sacramento, CA; Salt Lake City, UT; St. Louis, MO; San Francisco, CA; Seattle, WA; and Washington, DC. For more information on *Cover the Uninsured Week* visit: <http://covertheuninsuredweek.org/> or contact (202) 572-2928 or info@covertheuninsuredweek.org.

National Steps to a HealthierUS Summit

April 29-30, 2004, Baltimore, MD

The 2nd National *Steps to a HealthierUS* Summit, which will advance Secretary of Health and Human Services Tommy G. Thompson's *Steps to a HealthierUS* initiative, will be held on April 29-30 at the Baltimore Marriott Waterfront hotel. The April national summit will focus on chronic disease prevention and health promotion and will feature presentations on asthma, obesity, diabetes, heart disease and stroke, and

cancer, as well as lifestyle choices, including nutrition, physical activity, and tobacco use. The *Steps* initiative is committed to bringing policymakers, the health, education, and business communities, and the public together to establish model programs and policies that foster healthy behavior changes, encourage healthier lifestyle choices, and reduce disparities in health care. For registration information visit: <http://www.healthierus.gov/steps/>.

Conference to Address Improving Quality and Efficiency in Health Care

March 17th, 2004, Washington, DC

Leading experts, and scholars in the field of health care will gather on March 17, 2004 to review the American health care delivery system at a major health policy conference in Washington, DC. The one-day policy conference will consider alternatives to the traditional fee-for-service, solo practitioner approach to medicine. Speakers will examine the evidence about the impact of delivery system structure on cost, quality, and service, highlighting both existing and newer examples of systems that integrate care across providers and settings. They will also discuss steps that can be taken by policymakers and purchasers to encourage greater integration in health care delivery. *Delivery Systems Matter! Improving Quality and Efficiency in Health Care* will take place Wednesday, March 17th, 9:45am - 4:00pm at the National Academy of Sciences, 2101 Constitution Avenue, NW. For more information visit: <http://www.kpihp.org/areas/deliverysystem/conference.html>.

AMMA Leadership Summit

April 19-20, 2004, Washington DC

The Alliance of Minority Medical Associations (AMMA) and National Minority Health Month Leadership Summit and 3rd Annual Awards Dinner is taking place on April 19-20 at the Mandarin Oriental Hotel, in Washington, DC. This much-anticipated event will enable you to participate in issue-specific forums with other critical thinkers from the arenas of clinical and academic medicine, health care reimbursement, health policy, public health, organized medicine, and community-based organizations to address

the topic, *Data and Health Disparities: Shifting the Paradigm in Communities*. This national summit will focus on Cardiovascular Disease, Chronic Kidney Disease, Cultural Competency, Diabetes, Disease Management, Health Careers, Immunization, Mental Health, Oncology, Pediatric Wellness, and Respiratory Illness. For more information on the event visit:

<http://www.nmhm.org/>.

Dental Access Initiatives: Developing Innovative Programs

March 30, 2004 2pm – Volunteers in Health Care Teleworkshop

Volunteers in Health Care is hosting a teleworkshop titled, *Dental Access Initiatives: Developing Innovative Programs*, which will be held March 30th at 2pm Eastern Time. Participants in this workshop will learn about: the state of access to oral health care for the uninsured/underserved; types of dental programs

which use volunteer dental professionals to expand access; how three innovative dental access programs were developed; the key ingredients which have made these models successful; and how their respective communities are benefiting from them. The presenters will include an array of health professional working to provide dental care in their communities.

The cost to participate in the teleworkshop is \$50 per phone line, which can be payable by check, VISA, or MasterCard. To register for the call, please visit the VIH website at <http://www.volunteersinhealthcare.org>. Registrations and payment must be received by March 29th.

If you have any questions, please contact Volunteers in Health Care toll-free at 877-844-8442.

REPORTS AND ISSUE BRIEFS

Language Barriers to Hospital Access

ACORN (Association of Community Organizations for Reform Now) released a study documenting how non-English speakers are struggling to be understood at hospitals around the country. For the study, Spanish-speaking ACORN members in Arizona, California, Connecticut, Washington, DC, Florida, Pennsylvania, Rhode Island and Virginia contacted 70 hospitals by phone and 15 hospitals in person to see if Spanish-speaking staff were available. In 56 percent of these contacts, no Spanish-speaking hospital staff could be found. To view the study, visit: http://acorn.org/fileadmin/Additional_Accomplishments/National_report.pdf.

Disease Management Programs

The Center on an Aging Society has just released the fourth in a series of Issue Briefs on chronic and disabling conditions. These Issue Briefs are being released in conjunction with the Center's Data Profiles on chronic and disabling conditions in the United States. *Disease Management Programs* examines the question: Are programs improving the health of people with chronic conditions while reducing health

care costs? The Brief notes that increases in the number of people living longer with chronic conditions coupled with rising health care expenditures have spurred health plans, employers, and the government to consider the disease management approach. There is some evidence that disease management programs can reduce health care use and expenditures, but because it is a relatively new approach, its long-term impact is not yet known. Visit: <http://ihcrp.georgetown.edu/agingsociety/pubhtml/management/management.html>.

National Health Interview Survey

The National Center for Health Statistics (NCHS) has released updated estimates for 15 selected health measures: lack of health insurance coverage and type of coverage; usual place to go for medical care; obtaining needed medical care; influenza vaccination; pneumococcal vaccination; obesity; leisure-time physical activity; current smoking; alcohol consumption; HIV testing; general health status; personal care needs; serious psychological distress; diagnosed diabetes; and asthma episodes. For more information, please visit: <http://www.cdc.gov/nchs/about/major/nhis/released200312.htm#8>.

WEB RESOURCES

Area Risk Trends From The Behavioral Risk Factor Surveillance System

The Centers for Disease Control and Prevention (CDC) recently launched a new data analysis system, the SMART BRFSS (Selected Metropolitan/Micropolitan Area Risk Trends from the Behavioral Risk Factor Surveillance System). This analysis provides information about health issues for 98 metropolitan and micropolitan areas (MMSAs) across the U.S.,

as well as for some counties within those MMSAs. The BRFSS is a state-based data system that collects information on health risk behaviors, preventive health practices, and health care access.

To access local area risk data and quick view charts, visit: <http://apps.nccd.cdc.gov/brfss-smart/index.asp>. The website will also allow you to make comparisons of MMSAs and counties to state and national data.